



MESSIANIC CAREER INSTITUTE

MINISTRY RECOMMENDATION FORM

(TO BE COMPLETED BY CONGREGATIONAL LEADER)

Last Name

First Name

Applicant Name: _____

Applicant understanding and authorization: This form is to be completed by an individual who has observed your ministerial care or has supervised you while you were involved in ministerial areas of work or participation of ministry events. Please request him/her to mail this form and supporting statements directly to the Jewish Voice Messianic Career Institute. You acknowledge that this confidential statement is being submitted to the Jewish Voice Messianic Career Institute with the understanding that its content will not be shared with you. You hereby waive your right to see the confidential statement submitted on this form.

Applicant Signature

Date

To the Recommender: Each scholarship applicant to the Jewish Voice Messianic Career Institute must submit a recommendation from an individual who has provided the applicant with ministerial care or supervision. Serious consideration will be given to your comments; therefore, please complete the form carefully. Since a candid evaluation is requested, your comments will be held in the strictest confidence. The recommendation should be returned directly to the admissions office of the Jewish Voice Messianic Career Institute.

Name of local congregation _____

Mailing address _____

(Street/P.O. Box)

(City)

(State)

Congregational Leader _____

Email address _____

Contact
Number _____ Fax _____

(area code)

(Number)

(area code)

(Number)

How long have you known the applicant? _____ In what capacity? _____

How well do you know him/her?

By Name/Sight

Fairly well; numerous personal contacts

Casually – few personal contacts

Very well

How would you rate this person in the following areas?

	Excellent	Above Average	Average	Below Average	Not Observed
Christian Commitment					
Leadership					
Moral Character					
Initiative					
Cooperativeness					
Responsibility					
Social Adaptability					
Integrity					
Honesty					

NOTE: Please provide on a separate typed sheet your evaluation for this applicant's potential for being effective and competent in his/her abilities for leadership in ministry; focus on his/her interactions and relationships within the home and community. Please comment in on any relevant accomplishments or other areas as you deem important to our consideration of a scholarship for this applicant.

Your Signature

Title

Date

Please send in your Recommendation Form and additional requested materials to:

JV Messianic Career Institute
Office of Admissions
P.O. Box 6
Phoenix, AZ 85001

Or Scan and Email to:
Admissions@MessianicCareerInstitute.com



MESSIANIC CAREER INSTITUTE

PERSONAL RECOMMENDATION FORM

(TO BE COMPLETED BY A BELIEVING FRIEND)

Last Name

First Name

Applicant Name:

Applicant understanding and authorization: This form is to be completed by an individual (non-family member) who is a believer in Yeshua (Jesus) as the Messiah, knows you, and has observed your lifestyle. Please request him/her to mail this form and supporting statements directly to the Jewish Voice Messianic Career Institute. You acknowledge that this confidential statement is being submitted to the Jewish Voice Messianic Career Institute with the understanding that its content will not be shared with you. You hereby waive your right to see the confidential statement submitted on this form.

Applicant Signature

Date

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Recommender Name _____

Mailing address _____

(Street/P.O. Box)

(City)

(State)

Congregational You Attend _____

Congregational Leader/Contact # _____

Email address _____

**Contact
Number** _____ **Fax** _____

(area code)

(Number)

(area code)

(Number)

How long have you known the applicant? _____ In what capacity? _____

How well do you know him/her?

By Name/Sight

Fairly well; numerous personal contacts

Casually – few personal contacts

Very well

How would you rate this person in the following areas?

	Excellent	Above Average	Average	Below Average	Not Observed
Christian Commitment					
Leadership					
Moral Character					
Initiative					
Cooperativeness					
Responsibility					
Social Adaptability					
Integrity					
Honesty					

NOTE: Please provide on a separate typed sheet your evaluation for this applicant's potential for being effective and competent in his/her abilities for leadership in ministry; focus on his/her interactions and relationships within the home and community. Please comment in on any relevant accomplishments or other areas as you deem important to our consideration of a scholarship for this applicant.

Your Signature

Title

Date

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